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PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application No. : 10/628,221 Confirmation No. 5453  
Applicant : Peter Finamore  
Filed : July 28, 2003  
  
Art Unit : 1772  
Examiner: : Sandra M. Nolan  
  
Docket (atty ref.) No. : 16588-US  
Title : STORAGE CONTAINER FOR GASEOUS FUELS

Moline, IL 61265  
14 December 2004

Commissioner for Patents  
P. O. Box 1450  
Alexandria VA 22313-1450

Reply to Office Action dated 9/14/04

Sir:

Responsive to the Office Action dated 9/14/04, please amend the above-identified application as follows:

**Amendments to the Claims** are reflected in the listing of claims which begins on page 2 of this paper.

**Remarks/Arguments** begin on page 4 of this paper.

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Approved for use through 07/31/2006. OMB 0851-0031

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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	10/628,221	
	Filing Date	7/28/2003	
	First Named Inventor	Peter Finamore	
	Art Unit	1772	
	Examiner Name	Sandra M. Nolan	
Total Number of Pages in This Submission	6	Attorney Docket Number	16588-US

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual name	Darin Bartholomew (Reg. No. 38,444)	
Signature		
Date	12/14/2004	

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